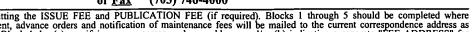
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>



appropriate. All further co	orm should be used for tran prespondence including the l below or directed otherwise ons.	Patent, advance ord	ers and notification of r	naintenance fees v	vill be mailed to the current	t correspondence address as	
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3624	7590 01/14/2005		hav	e its own certificat	e of mailing or transmission.	O,	
VOLPE AND K			***	Cer	tificate of Mailing or Tran	smission	
UNITED PLAZA			i ne Stat	ereby certify that the service vises Postal Service v	ous Fee(s) Transmittal is being with sufficient postage for fi	ng deposited with the United rst class mail in an envelope above, or being facsimile date indicated below.	
30 SOUTH 17TH			add	ressed to the Mai	I Stop ISSUE FEE address	s above, or being facsimile	
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			15	<u>tephen B.</u>	SCROLL		
				Kepling.	· Low	(Signature)	
			<u> </u>	0 4/1/2005	<u> </u>	(Date)	
APPLICATION NO.	FILING DATE	F	IRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/850,069	05/08/2001		Valentino Campagnolo	04/05/2005	Q64138 TEMMANUS AAAAA114 AG	9153	
TITLE OF INVENTION: I	ELECTRONIC CONTROL C	ONTAINMENT U	NIT FOR BICYCLES 1		DEMMANU2 00000114 09	כסטטנסי	
				01 FC:2501		700.00 OP	
			•	02 FC:1504 03 FC:8001		300.00 DP 30.00 DP	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PUBLI	CATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	· · · · · · · · · · · · · · · · · · ·	\$300	\$1000	04/14/2005	
EXA	MINER	ART UNI	Γ CLASS	- SUBCLASS	]		
CRONIN,	STEPHEN K	3727	224	4-414000			
1. Change of correspondent CFR 1.363).	ce address or indication of "Fo	ee Address" (37	2. For printing on the p	atent front page, li	st Wolne	and Koenig, P.C	
· ¬ · · ·	dence address (or Change of	Correspondence	(1) the names of up to or agents OR, alternati		nt attorneys	and Roening, 1.0	
Address form PTO/SB/	122) attached.	Correspondence	(2) the name of a sing	•	member a 2		
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to				
3. ASSIGNEE NAME AN	D RESIDENCE DATA TO B	E PRINTED ON TH	HE PATENT (print or ty	pe)			
PLEASE NOTE: Unles	s an assignee is identified be in 37 CFR 3.11. Completion	elow, no assignee d	ata will appear on the p	atent. If an assigr	ee is identified below, the	document has been filed for	
(A) NAME OF ASSIGN	NEE	(B)	RESIDENCE: (CITY ar	nd STATE OR CO	UNTRY)		
Campagnolo S.	r.1.	Vi	a della Chim	ica, 36100	) Vicenza, Ital	у	
Please check the appropriat	te assignee category or catego	ries (will not be prir	nted on the patent) :	Individual 🖾 C	orporation or other private g	roup entity Government	
4a. The following fee(s) are		<del></del>	Payment of Fee(s):		<u></u>	,	
Issue Fee   A check in the amount of the fee(s) is enclosed.							
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 10  The Director is hereby authorized by charge the equired rose(), or credit any overpayment, to Deposit Account Number 22-9492 (enclose an extra copy of this form).							
5. Change in Entity Status	s (from status indicated above				· · · · · · · · · · · · · · · · · · ·		
a. Applicant claims S	SMALL ENTITY status. See	37 CFR 1.27.	b. Applicant is no lon	ger claiming SMA	LL ENTITY status. See 37 (	CFR 1.27(g)(2).	
NOTE: The Issue Fee and I	) is requested to apply the Issu Publication Fee (if required) veords of the United States Pate	vill not be accepted	from anyone other than t	pply any previous he applicant; a reg	y paid issue fee to the applic istered attorney or agent; or	ation identified above. the assignee or other party in	
Authorized Signature	Lesli B Ch	) 	-	Date 4/	1/2005		
Typed or printed name	Stephen B. Scho	ott	·	Registration	No. 51,294		
		II The information	is required to obtain			od by the LISPTO to	
an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	ion is required by 37 CFR 1.3 lity is governed by 35 U.S.C. upplication form to the USPT is for reducing this burden, skginia 22313-1450. DO NOT 1-1450.	11. The information 122 and 37 CFR 1. 0. Time will vary could be sent to the SEND FEES OR CO	18 required to obtain of 1.14. This collection is esteppending upon the indiv. Chief Information Office OMPLETED FORMS To	retain a benefit by the timated to take 12 cridual case. Any cer, U.S. Patent and O THIS ADDRES:	me public which is to file (ar minutes to complete, includi imments on the amount of t Trademark Office, U.S. Dep S. SEND TO: Commissioner	and by the USP 10 to process) and gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	
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PTO/SB/21 (09-04)

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Application Number	ð9/850, <b>0</b> 69
Filing Date	May 8, 2001
First Named Inventor	Valentino Campagnolo
Art Unit	3727
Examiner Name	Cronin, Stephen K.
Attorney Docket Number	CAM3-PT019
	Filing Date First Named Inventor Art Unit Examiner Name

ENCLOSURES (Check all that apply)						
X	Fee Trans	smittal Form	Drawing(s)  After Allowance Communication to TC  Appeal Communication to Board			
Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement		ent/Reply  fter Final  ffidavits/declaration(s)  n of Time Request  Abandonment Request	Licensing-related Papers  Of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Provisional Application Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund CD, Number of CD(s)  Of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):  Form PTOL-85 Issue Fee Transmittal with Certification of First Class Mailing.			
Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		nt(s)  Missing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53	Remarks  Landscape Table on CD			
		SIGNA	TURE OF APPLICANT, ATTORNEY, OR AGENT			
VOLPE AND KOENIG, P.C.			G, P.C.			
Signature Steph B. School						
Printed	d name	Stephen B. Schott				
Date		2/1/2005	Reg. No. 51,294			

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Signature

Typed or printed name

stephen B. Sobett

Date 4/1/2005

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## TRANSMITTAL For FY 2005

ত্য	Applicant claims small entity status.	See 37 CFR 1 2	7
ഥ	Applicant claims small entity status.	See 37 CFK 1.2	1

TOTAL AMOUNT OF PAYMENT (\$) 1.030.00

Complete if Known					
Application Number	09/850,069				
Filing Date	May 8, 2001				
First Named Inventor	Valentino Campagnolo				
Examiner Name	Cronin, Stephen K.				
Art Unit	3727				
Attorney Docket No.	CAM3-PT019				

				ttorney Docke	0, 11	VI3-1-1019	
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 22-0493  Deposit Account Name: Volpe and Koenig, P.C.							
For the above-iden			ctor is hereby				
Charge fee(	s) indicated b	elow		Charg	ge fee(s) indic	ated below, exce	pt for the filing fee
	R 1.16 and 1	ecome public. Cre		<u> </u>	t any overpay		vide credit card
FEE CALCULATION							
1. BASIC FILING, SEA	FILING		SEARCH	I FEES		TION FEES	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  200 100							
Multiple dependent clai	Extra Claim	s <u>Fee (\$)</u>	<u>Fee Pai</u>	d (\$)	Multiple D	ependent Claims	<u> </u>
· =		_ x	_ = 0.00 _		Fee (\$)	Fee Pai	d (\$)
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HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)  for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)  Fee Paid (\$)  4. OTHER FEE(S)  Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)  Other: Issue Fee and Publication Fee and 10 Soft Copies 1,030.00							

SUBMITTED BY			
Signature	Kerlen B. Shin	Registration No. 51,294 (Attorney/Agent)	Telephone 215-568-6400
Name (Print/Type)	Stephen B. Schott		Date 4/1/2005

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